

COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM

Company:								
		<u>LMI</u>	<u>SUMMA</u>	<u>.RY</u>				
NUMBER PERSONS IN FAMILY	1	2	3	4	5	6	7	8-
COUNTY LMI LEVEL (insert income limits appropriate to family size.)								
# of EMPLOYEES @ LMI LEVEL* (all persons below the Moderate income limit)								
*As noted on the Employn Low, Low and 30% of Med								
ection II								
. Total Current Employees								
. Total Employees (New o								
. Total Employees Filling	•							
(Employees not com								
	Or							
. Total Minorities								
Total Female Head of	f Househo	old		Tot	al Elderly	y		

2. Employment Status Statements for #3 above.

Attachments: 1. Current company employee listing, including date of hire.